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**PATENT APPLICATION**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re the application of:

Attorney Docket No.: 3349.01US01

Barker et al.

Confirmation No.: 1105

Application No.: 09/963,863

Examiner: Derakshani

Filed: September 26, 2001

Group Art Unit: 3654

For: BEER DISPENSER

**AMENDMENT**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RECEIVED**

MAY 03 2004

TECHNOLOGY CENTER R3700

Sir:

**INTRODUCTORY COMMENTS**

In response to the Office Action of January 20, 2004, amendment to the above-identified patent application is requested.

The present amendment comprises the following sections:

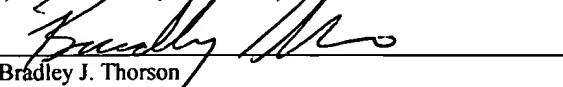
- A. Amendments to the Claims
- B. Amendments to the Drawings
- C. Remarks

*Please grant any extension of time necessary for entry; charge any fee due to Deposit Account No. 16-0631.*

**CERTIFICATE OF MAILING**

I hereby certify that this document is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

April 20, 2004  
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Bradley J. Thorson

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Attorney Docket No. 3349.01US01

**AMENDMENT TRANSMITTAL**

In re the application of:

Barker et al.

Confirmation No.: 1105

Application No.: 09/963,863

Examiner: Derakshani

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Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

Enclosed are:

Amendment (14 pages).

Petition for Extension of Period for Response.

\_\_\_\_\_.

The filing fee has been calculated as shown below:

	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra (Equals)	Small Entity Rate	Add'l Fee	OR	Large Entity Rate	Add'l Fee
Total	26	- 33	=	x 9	\$		x 18	\$
Indep.	5	- 3	=	x 43	\$		x 86	\$172.00
Mult. Dep.			=	+ 145	\$		+ 290	\$
				TOTAL	\$	OR	TOTAL	\$172.00

First Presentation of Multiple Dependent Claim [MDC]

\* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

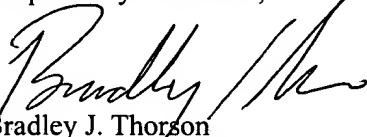
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

Applicant(s) is/are entitled to small entity status in accordance with 37 CFR 1.27.

A check in the amount of \$172.00 is attached. The Commissioner is hereby authorized to charge payment of any fees under 37 C.F.R. § 1.16 for presentation of extra claims or credit any overpayment to Deposit Account No. 16-0631.

Respectfully submitted,

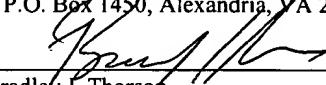
  
Bradley J. Thorson  
Registration No. 52,288

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